

series of seven lectures on "Angina Pectoris and Allied States," as they were delivered to the graduate class in medicine at the Johns Hopkins Hospital. The first lecture of the series is mainly historical and nosological in its scope; the second treats of the etiology and general description of the malady; the third describes the phenomena of the attack; the fourth deals with allied and associated conditions; the fifth with pseudo-angina pectoris; the sixth with the theories of the disease; and the seventh and final lecture with the diagnosis, prognosis, and treatment.

Adopting what some one has termed the English style in the extensive report of his cases, the author runs a risk at times of his subject dragging, a crisis averted only by his inimitable style and apt illustration. The historical sketch, enriched as it is with many quotations that only the author's breadth of research and the thoroughness that characterizes his writings in general would lead us to expect, is one of the most interesting lectures of the series.

In all that portion of his subject that bears in any way upon its pathological side Dr. Osler is at his best, and his wide experience is everywhere evident. Here, too, as is usually a feature in most of his writings, a large series of cases occurring within his own experience affords abundant material for illustrating the different phases of his subject.

The value of this contribution to the subject of angina pectoris can hardly be overestimated, as it must constitute a basis upon which further researches in the same line shall be constructed. The author has added another to his many writings that are deemed classical.

T. G. A.

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- I. RÉSECTION TOTALE ET BILATÉRALE DU SYMPATHIQUE CERVICAL DANS LE TRAITEMENT DU GOÎTRE EXOPHTHALMIQUE ET DE L'ÉPILEPSIE.
 - II. L'HEMICRANIECTOMIE TEMPORAIRE.
 - III. LA RÉDUCTION BRUSQUE DES GIBBOSITÉS POTTIQUES.
 - IV. LA SPLÉNÉCTOMIE.
 - V. DE LA NÉPHROPÉXIE. DESCRIPTION D'UN NOUVEAU PROCÉDÉ OPÉRATOIRE.
 - VI. NOUVEAUX PROCÉDÉS POUR LA CURE RADICALE DES HERNIES INGUINALES.

THESE are the titles of six reprints presented to the Twelfth International Medical Congress in Moscow by Prof. Thomas Jonnesco, of Bucharest. They indicate great activity and great boldness. Whether there is also combined with these two excellent characteristics that rather critical judgment which, while it does not reject a thing because it is new, does not necessarily accept it as true because it is new, is possibly a question.

Following the lead of Alexander, of Liverpool, who resected the superior sympathetic ganglion in the neck, Jonnesco has advocated the total bilateral resection of the cervical sympathetic, not only including the superior, but also and especially the inferior and, if it exists, the middle ganglion and the connecting nerve filaments, for both epilepsy and exophthalmic goitre. In Chipault's *Travaux de Neurologie Chirurg.*

gicale for the present year will be found a very elaborate description of his operative procedure, with a number of cuts of specimens showing how complete his resections are. In that paper he has promised to give to the profession his results in detail. The present paper does not give the results in such a form that one can pass critical judgment upon them. The only statement is that he "has operated on twenty-six epileptics and that the therapeutical results have been excellent." In some cases the cure has been maintained for more than a year; others have been markedly ameliorated; always the attacks have become less frequent and less intense; none of them has been aggravated. We confess that it would be more satisfactory to surgeons if details of each case could be given, especially after a considerable time has elapsed.

No less bold is the second paper, on temporary hemicraniectomy, which, however, ought to be called hemicraniotomy. In this procedure he has followed a very able and also bold surgeon, Doyen, of Rheims, who also has a paper on the subject in the same volume of Chipault's *Travaux de Neurologie Chirurgicale*. Jonnesco gives the results in six cases in which he has turned down literally about one-half the skull; usually only upon one side, but in one case on both sides. The bilateral case got well. Of the other six, one died and five got well, a surprising result after so extensive an operation; but we cannot see from the records that they were very much better. The operations were done for epilepsy, microcephalus, and idiocy.

The third paper is in advocacy of Chipault's and Calot's recent method of the sudden reduction at a single sitting of the deformity from Pott's disease. The paper refers to thirteen cases, in which he has done it with certain modifications of the process. Apparently no ill effect has followed. It is, however, in our opinion, by no means a well-decided question that it is a wise procedure. The pictures showing in each a poor little "kid" stretched out on a table, surrounded by five, six, or seven men with pulleys applied to the head and the hips, followed by enveloping the whole body in plaster-of-Paris, certainly excite our sympathy.

The splenectomy paper reports twelve cases; eleven for enlarged malarial spleen and one for a hydatid cyst. Some illustrations are given, showing patients before and after operation, and a number of the spleens are figured. Of the twelve cases nine got well, and apparently their general health was not seriously worse from the loss of the spleen.

The paper on nephropexy describes the operative measure of laying bare the kidney, division of its capsule, and then sewing it and the capsule to the periosteum of the eleventh or twelfth rib. The reviewer can only add that in a considerable number of cases he has done the operation by simply passing sutures through the kidney without such elaborate technique, and has obtained good results.

The last paper describes a modification of Bassini's operation.

W. W. K.